DECLARATION AND POWER OF ATTORNEY

As a below named in antor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name: I believe I am the original, first, and sole in antor (if only on name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for whom a partie is sought on the invention entitled: BIOPSY INSTRUMENT HAVING IRRIGATION AND ASPIRATION

nginal, first, and sole in antor (if only only only only only only only only	is sought on th	he invention entitled: B	first, and joint inventor (if p HOPSY INSTRUMENT HA	olural names are listended in the listender of the listen	ed below) of the	e subject matter TION
ne specification of which is attached a		ABILITIES led on May 15 1998			an United Si	tates Application
enal No. 09/079,168	MU/UI = 4400	or PCT Internationa	al Application No.			tates Application d was amended
n	(if applicat	 .	7 (pp. 100 101 111 111 111 111 111 111 111 11			u was amene.
I hereby state that I have reviewed an	d understand ti	the contents of the above	•			any amendmen
eferred to above. I acknowledge the d	-		-			
I hereby claim foreign priority benefits						• .
of any PCT international application(s)						
pplication(s) for patent or inventor's cell	titicate, or any	PCT International applic	cation(s) having a ming dat	le before that or the	application(s)	of which prionity
s claimed:						
Country	Appl	lication Number	Date of Filing	Priority Cl	laimed Under 3	5 U.S.C. 119
	†		1		YES	□ NO
	1.				YES	o NO
I hereby claim the benefit under 35 L	100 8119(e	a of any United States		 	160	
		Totally Office States ,	Movisional application(a)			
Application	Number		·	Date of Filing		
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o patentability as defined in 37 CFR § ling date of this application: Application Number	1.50 471.0.	· .	of Filing	Status (Patente		
						
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